## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

				- <u> </u>	(0	-,						
INSTRUCTIONS: This appropriate. All further indicated unless corrected maintenance fee notifications.	form should be used to correspondence including ed below or directed oth	for transmitting ng the Patent, a nerwise in Bloc	the ISSU dvance o k 1, by (	JE FEE and PUBLIC rders and notification a) specifying a new c	of morres	ON FEE (if requaintenance fees pondence address	nired). B will be n ; and/or	locks 1 through 5 s nailed to the current (b) indicating a sepa	ould be corresponding to the corresponding to the contract of	completed where indence address as EE ADDRESS" for		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
22116	7590 10/28	/2008			nave							
SIEMENS CORPORATION INTELLECTUAL PROPERTY DEPARTMENT 170 WOOD ACCEPTANCE SOUTH						Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
ISELIN, NJ 08830						Ann Hickey (Depositor's name)						
		an Hickey			(Signature)							
						January 23, 20 <b>9</b> 9				(Date)		
APPLICATION NO.	FILING DATE			FIRST NAMED INVEN	TOR	TOR ATTORNEY DOCKET			. CONFIRMATION NO.			
10/559,862 05/23/2006			Andrew Shephero	i 2003P0			3P08272WOUS	8272WOUS 7457				
TITLE OF INVENTION	: TILT PAD BEARING	ASSEMBLY										
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE D	OUE	E PREV. PAID ISSUE		TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	МО	\$1510		\$300		\$0		\$1810		01/28/2009		
EXAMINER		ART UNIT		CLASS-SUBCLASS	3							
CHARLES, MARCUS 3656				384-309000								
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).				2. For printing on the patent front page, list								
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,								
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRIN	TED ON	THE PATENT (print of	or typ	e)			***************************************			
PLEASE NOTE: Uni	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no	assignee orm is NC	data will appear on to	he pa g an a	atent. If an assig	nee is id	entified below, the d	ocument	has been filed for		
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)												
Siemens Aktiengesellschaft, Muenchen, Federal Republic Germany												
Please check the appropr	iate assignee category or	categories (wil	ll not be p	rinted on the patent) :		Individual 🛛 C	Corporati	on or other private gro	oup entity	y Government		
4a. The following fee(s)	are submitted:		4	b. Payment of Fee(s):	(Plea	se first reapply a	ny prev	iously paid issue fee	shown a	bove)		
☐ A check is enclosed.												
						lit card. Form PTO-2038 is attached.  are by authorized to charge the required fee(s), any deficiency, or credit any Deposit Account Number 19–2179 (enclose an extra copy of this form).						
Advance Order -	# of Copies			overpayment, to I	Depos	sit Account Numb	per 19	9-2179 (enclose a	n extra c	opy of this form).		
<ol> <li>Change in Entity Sta</li> <li>a. Applicant claim</li> </ol>	tus (from status indicate as SMALL ENTITY state		1.27.	☐ b. Applicant is no	o long	ger claiming SMA	LL ENT	FITY status. See 37 C	FR 1.27(	g)(2).		
NOTE: The Issue Fee an interest as shown by the					_	-			-			
Authorized Signature	0	D- 6	ACO	1				ARY 23, 2009				
Typed or printed nam	e JANET	D. HOOD				Registration	No	61,142				
This collection of informan application, Confiden	nation is required by 37 C stiality is governed by 35	CFR 1.311, The U.S.C. 122 an	informati d 37 CFR	on is required to obtain	n or r	etain a benefit by imated to take 12	the publ	ic which is to file (and to complete, including	i by the	USPTO to process)		

an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.